



State of New Hampshire  
**DEPARTMENT OF ENVIRONMENTAL SERVICES**

6 Hazen Drive, P.O. Box 95, Concord, NH 03302-0095

(603) 271-3406 FAX (603) 271-7894



September 13, 2002

**Letter of Deficiency**

DAM #024.15

Ms. Lucy Kinney  
Fraser Paper of NH LLC  
Waste Water Treatment Plant  
650 Main Street  
Berlin, NH 03570

RE: Burgess Wastewater Lagoons, Berlin

Dear Ms. Kinney:

The Department of Environmental Services, Dam Bureau (DES) consistently strives to enhance the safety of dams in New Hampshire through its dam safety program. One of the many instruments that plays a part in reaching this goal is our inspection program. DES is forwarding this correspondence to you to advise you that in accordance with RSA 482:12 and Env-Wr 502.02, an inspection of the subject dam was conducted on October 19, 2001. During this visual inspection and/or file review, the following deficiencies were observed:

There was brush located along the exterior slopes of the dam;

2. The gravel crest of the dam also serves as part of the lagoon service roadway, and is in a stable and level condition;
3. There is no operation and maintenance plan (O&M) on file with the DES; and
4. The Emergency Action Plan (EAP) has not been updated nor tested with the last year.

DES believes that the above deficiencies can be corrected by performing the following items by the indicated schedule:

**December 30, 2002**

Remove all trees and brush from the exterior slope of the dam, as well as from within 10 feet of the downstream toe;

2. Prepare and submit to the DES a written O&M plan. The plan should describe the control of impoundment levels, monitoring and maintenance procedures, and identify emergency contact personnel; and
3. Update and test the EAP as required on an annual basis.

DES is requesting that you complete and submit the attached "Intent to Complete Repairs" form, within 30 days of receipt of this letter, that will provide for correction of the identified deficiencies by the date(s) indicated above. If you believe changes to the items of work or dates are necessary, please make the changes directly on the form and provide a brief explanation. We have enclosed a self addressed stamped envelope for you to return this form.

Letter of Deficiency  
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Our intent in sending you this correspondence is to make you aware of items that DES believes warrant your attention to insure the continued safe operation of your dam. It is our hope that, through the submittal of the attached form and a commitment to keeping a well-maintained dam, you will voluntarily comply with the requested items of work. If we do not receive the intent form or a similarly adequate written reply, we will assume that you are in agreement with our findings and recommendations and DES will carry out follow-up inspections accordingly.

If you have any questions or comments regarding this Letter of Deficiency or would like to be present at future inspections, please contact me at 271-3406, or write to the Water Division at the address listed on the top of the previous page.

Sincerely



Amy C. Clark, P.E.  
Dam Safety Engineer

Attachments Guideline for an O&M plan, DB8, DB13

cc: Gretchen Rule ✓

Town of Berlin

Certified # 7000 1670 0000 0586 0813

ACC/was/h:/safety/wendy/lod/024-15lod.doc



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Department of Environmental Services  
State Dam Safety Program  
Water Division, Dam Bureau  
6 Hazen Drive, P.O. Box 95  
Concord, NH 03302-0095

**Intent to Complete Repairs**

DAM #024.15

DAM Burgess Wastewater Lagoons

RE: Letter of Deficiency: Issued on September 13, 2002

Dear Dam Safety Program:

In response to the above referenced Letter of Deficiency (LOD), I concur with the Department of Environmental Service's recommendations, and specifically agree to complete the following items by the indicated schedule.

**DATE: December 30, 2002**

1. Remove all trees and brush from the exterior slope of the dam, as well as from within 10 feet of the downstream toe;
2. Prepare and submit to the DES a written O&M plan. The plan should describe the control of impoundment levels, monitoring and maintenance procedures, and identify emergency contact personnel; and
3. Update and test the EAP as required on an annual basis.

In lieu of the above, you may propose adjustments to the content or schedule associated with the requested repairs/work. (please state reasons for proposal and use reverse side if more space is needed).

Signature of Owner: \_\_\_\_\_

\_\_\_\_\_ (print name)

Date: \_\_\_\_\_

ENG-: ACC